

CITY OF MADISON FIRE DEPARTMENT
101 MILL ROAD
MADISON, ALABAMA 35758
(256) 772-3326

APPLICATION FOR OPEN BURNING PERMIT

FILL OUT TOP PORTION AND CHECK (WARMING) TO APPLY FOR A WARMING FIRE PERMIT

NAME: _____ DATE: _____

COMPANY: _____ TELEPHONE # _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIPCODE: _____

MATERIAL TO BE BURNED: _____

LOCATION: _____

DISTANCE TO NEAREST INHABITED STRUCTURE: _____ FEET

AIR CURTAIN DESTRUCTOR MANUF: _____ MODEL _____

TYPE OF OPEN BURNING: (Check one)

SILVICULTURAL _____ HORTICULTURAL _____ AGRICULTURAL _____

LAND CLEARING _____ W A R M I N G _____ HEALTH _____

OTHER: _____

APPLICANTS SIGNATURE: _____

APPROVAL IS REQUIRED FROM A REPRESENTATIVE OF THE ALABAMA FORESTRY COMMISSION OR THE ALABAMA EXTENSION SERVICE ATTESTING TO THE FACT THAT THE OPEN BURNING AS PROPOSED IS A RECOMMENDED OR APPROVED PRACTICE FOR **SILVICULTURAL**, HORTICULTURAL, OR AGRICULTURAL PURPOSES. APPROVAL FROM A REPRESENTATIVE OF THE HEALTH DEPARTMENT IS REQUIRED FOR REMOVAL OF PESTS, GERMS, DEAD ANIMALS, ETC. BY OPEN BURNING.

REPRESENTATIVE SIGNATURE

DATE

PRINT NAME AND ORGANIZATION

APPROVAL OF PROPOSED OPEN BURNING BY REPRESENTATIVE FROM MADISON FIRE DEPARTMENT.

SIGNATURE

DATE